	$\triangleright$	
	ACCEPTED FOR PROCESSING - 2019	
	山	
	PH	
	E	
	П	
	$\Xi$	
	먺	
	õ	
	CE	
	SS	
	Ë	
	ი	
	2	
	36	
	کے	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
,	₹	
	24	
	ဗ္	
C	#	
C	MMAN	
C	1990AM - 0	Against the same and the same a
c	196AM - SC	**************************************
K	1#AM - SCPS	**************************************
3c	197AM - SCPSC -	,
30	1 <b>第</b> AM - SCPSC - 20	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
30	1 <b>%</b> AM - SCPSC - 2019	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
c	SCPSC - 201	
30	1 <b>%</b> AM - SCPSC - 2019-256-	
20	1 <b>%</b> AM - SCPSC - 2019-256-T -	
20	1₩AM - SCPSC - 2019-256-T - Pa	
	1 <b>₩</b> AM - SCPSC - 2019-256-T - Page	
	1 <b>₩</b> AM - SCPSC - 2019-256-T - Page 1	
30	1#AM - SCPSC - 2019-256-T - Page 1 of	

	286194
STATE OF SOUTH CAROLINA	)
(Caption of Case)  Example: Application for a Class C Charter Certificate from	BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
John Doe dba Doe's Limo	TRANSPORTATION COVER SHEET
	DOCKET 2019 - 250 - T
	If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.
(Please type or print) Submitted by: ERSKINE, J. CARTER, DBA.	Telephone:
Address: 75, MCGREE, St.	_ Fax:
Address: 75, MCGREE, St. BambergE. SC. 29003	Other:
	Email: Enstine Liphon CPM9. Og. Mando
NOTE: The cover sheet and information contained herein neither replace as required by law. This form is required for use by the Public Service be filled out completely.	
NATURE OF ACTION	N (Check all that apply)
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	Request to Amend Scope of Authority
Application - Class C Charter	Request to Amend Tariff (rate increase, etc.)
Application - Class C Charter Bus	Request to Amend Passenger Limit
Application - Class C Non-Emergency	Request
Application - Class C Stretcher Van	Exhibit
Application - Class E Household Goods	Late-Filed Exhibit
Application - Class E Hazardous Waste	Letter
Application	Proposed Order
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded	Reservation Letter Response
Request for Cancellation of Certificate	Return to Petition
Request for Suspension	□ Other: 3019 □
Request for Reinstatement	

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

MAIL / DMS

2019-256-1

#### PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR

Phone: (803) 896-5100

Fax: (803) 896-5199

	OPERATION OF MOTOR VEHICLE CARRIER
	Date: Deb 1, 19
C	LASS C - TAXI
	pplication is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision
οī	FS.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.  ERSKINE J. Carter aba
1.	Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)
	•
	75, MCGREE, St. Bamburge, SC 29003 Street Address of Applicant
	, and the state of the production of the state of the sta
	Mailing Address of Applicant (if different from street address)
	803-662-0426, 803, 347, 9526 Phone Phone
	Enkine galoo. CPM9 Q. 9 Mail, Com.
,	If the Applicant is an LLC and approximate an applicant is an LLC and approximate the Continue of the Continue
٤.	If the Applicant is an LLC or a corporation, a copy of the Certificate of Existence from the South Carolina Secretary of State and the Articles of Incorporation must be attached. (If incorporated outside of SC, attach South
	Carolina Secretary of State "Foreign Corporation" Certificate.)
3.	Select Entity Type: (Check one)
	Individual Owner/Sole Proprietorship  Partnership - List names and addresses of all person having an interest in the business.
	Corporation - List names and addresses of two principal officers.
	Partnership - List names and addresses of all person having an interest in the business. The Corporation - List names and addresses of two principal officers.
	PECEIVED:
	1 of 8 JUN 2 6 2019 V
	1010

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

#### Financial Statement

Applicant's assets and liabilities are as follows:

Assets:		<u>Liabilities:</u>		ĉ
Value of Real Estate	0	Mortgage/Loan on Real Estate	6	
Value of Motor Vehicles	\$26,00,00	Loans Owed on Motor Vehicles	0	
Cash on Hand	\$ 100,00	Business/Other Loans Owed	0	] _ _
Cash in Bank	\$500,80	Other Liabilities or Debts	6	]و
Value of Other Assets and Equipment  Total Assets	\$3,550,00	Total Liabilities	0	IIV 24 9:14 AM -
INSTRUCTIONS:				SCPSC - ZC
1. "Value of Real Estate" m Company/Business App		market value of any real property/buildings ov	vned by the	2019-256-

- "Mortgage/Loan on Real Estate" means the outstanding balance on any Mortgage, Equity Line or other Loan secured by the Real Estate listed in Item 1.
- 3. "Value of Motor Vehicles" means the actual or fair estimated value of any moving vans, trucks or other vehicles owned by the Company/Business Applying for a Certificate.
- 4. "Loans Owed on Motor Vehicles" means the outstanding balance on any loans or liens on the vehicles listed in Item 3.
- 5. "Cash on Hand" is the total of actual cash held by the Company/Business applying for a Certificate on the day this form is filled out.
- 6. "Business/Other Loans Owed" means the outstanding balance on any small business loan or other unsecured loan made by a person, bank or business to the Business/Company applying for a Certificate.
- 7. "Cash in Bank" means the current balance in checking accounts, savings accounts or the like in the name of the Company/Business applying for a Certificate. Do not include retirement accounts or personal bank account balances.
- 8. "Value of Other Assets and Equipment" should include the actual or estimated value of items such as office equipment (computers/furnishings), moving equipment (hand trucks/blankets/strapping), and trailers.
- 9. "Other Liabilities or Debts" means specific amounts/balances which the Company/Business applying for a Certificate knows that it owes to other persons or companies; for example Franchise Fees. This does NOT include regular bills such as electricity bills, security system costs, insurance, salaries, etc.

#### PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges:

\$1.75, a mile, at 10,00. to 20,00. Round. Teips.

Requested Scope of Authority: Check all counties in which you are requesting permission to operate. You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.

Abbeville	Cherokee	Florence	Lee	Saluda
Aiken	Chester	Georgetown	Lexington	Spartanburg
Allendale	Chesterfield	Greenville	Marion	Sumter
Anderson	Clarendon	Greenwood	Marlboro	Union
Bamberg	Colleton	Hampton	McCormick	Williamsburg
Barnwell	Darlington	Horry	Newberry	York
Beaufort	Dillon	Jasper	Oconee	<i>)</i>
Berkeley	Dorchester	Kershaw	Orangeburg	Statewide
Calhoun	Edgefield	Lancaster	Pickens	
Charleston	Fairfield	Laurens	Richland	

#### **DESCRIPTION OF EQUIPMENT**

You are not required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

<u>Maximum Number of Passengers Vehicle is Equipped to Carry:</u> (The number of passengers a vehicle is equipped to carry is based on the number of <u>seatbelts</u> in the vehicle, including the driver's seatbelt.)

1-7 Passengers, including driver

3-15 Passengers, including driver

MAKE	YEAR & MODEL	VIN#	EMPŢY WEIGHT
Dodge.	2602, GR.Carn. SP	2B4GP443	32K682514.5800
		_	
			·
	•		
			·

4 of 8

### **Get A Quote Indication**

Provided through: Johnson & Johnson, Inc.'s website

#### **Insured Information**

**Business Name:** 

**Erskine Carter** 

City, St Zip:

Bamberg, SC 29003

**Business Type:** 

Individual

**Business Description:** 

**Taxi Service** 

Quote Reference Number:

9585533

#### **Contact Information**

Name:

Fred Ulmer

Phone Number:

(803) 655-5199

Email Address: Contact Type:

fulmer@insinb.com Agent - THE ULMER AGENCY, INC.

#### **Vehicle Information**

#

1

Year Make/Model **DODGE GRAND CARAVAN** 2002

VIN

**Entered Value** 

#### **Driver Information**

First Name

Last Name

At Fault Count

Violations Count

**Convictions Count** 

**Erskine** 

Carter

0

**Coverage and Premium Information** 

Liability

\$300,000 CSL

Annual Premium\*

Coverage

\$3,996

**Uninsured Motorists** 

\$100,000 CSL

\$558

**Underinsured Motorists** 

\$100,000 CSL

\$558

**Medical Payments** 

\$1,000

\$135

**Physical Damage** 

None

Limit

N/A

#### Total Indicated Annual Premium\*

\$5,247

<sup>\*</sup>Note: Your actual premium may vary due to driver quality, loss history, account risk characteristics, or other factors.

#### Exhibit Fit, Willing, and Able (FWA)

ERSKING J. CaKTER. Sa.
Name of Applicant

I. Are the	re currently any ou	itstanding judgments a	igainst the Applicant?
○ Ye	S	O-No	
If Yes,	list judgements he	ere:	

2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?

(D) Yes

O No

3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

(b) Yes

O No

## **Exhibit on Driver Qualifications**

1. Applicant understands that all drivers must be a minimum of 18 years of age.		
	① Yes	○ No
2.		at a certified copy of the driver's three (3) year driving record issued by the SC DMV DMV of the state in which the driver is or has been domiciled for such period must icant's business office.
	@ Yes	○ No
3.		at a criminal history background check from the state where the driver currently lives Applicant's business office.
	Ø Yes	○ No
4.	• •	t all drivers operating a vehicle under a Class C Taxi Certificate must have in trating a charter vehicle, a valid driver's license issued by the SC DMV or the current river.
	<b>♥</b> Yes	○ No
5.	vehicles to drivers who ar	t all Class C Taxi Certificate holders are prohibited from employing or leasing e registered, or required to be registered, as sex offenders with the South Carolina ivision or any national registry of sex offenders.
	<b>⊗</b> Yes	O No

#### PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 EXECUTIVE CENTER DRIVE, SUITE 100 COLUMBIA, SOUTH CAROLINA 29210

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Volume 10, S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 2, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

S.C. Code Ann. Section 58-3-250 states, in part, that every final order of the Commission must be served by electronic service, registered or certified mail, upon the parties to the proceeding or their attorneys.

Please check the applicable box:

Ш	The Applicant AGREES to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System. The Applicant authorizes the Commission to serve its orders by using the e-mail address as it appears on page one of this Application. To sign up for eService notifications, please visit www.psc.sc. gov to create a My DMS account.
	The Applicant DOES NOT AGREE to receive future Commission orders related to the Applicant's authority in South

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Applicant's Signature

Title of Applicant (e.g. President, Owner, etc.)

STATE OF SOUTH CAROLINA

COUNTY OF Orcage burg

SWORN TO BEFORE ME his 25 day of 5

, 20

Notary Public

Commission Expires 11-19-2025



# The Public Service Commission State of South Carolina

COMMISSIONERS
Comer H. "Randy" Randall, Third District
Chairman
Elliott F. Elam, Jr., Second District
Vice Chairman
John E. "Butch" Howard, First District
Thomas J. "Tom" Ervin, Fourth District
Swain E. Whitfield, Fifth District
Justin T. Williams, Sixth District
G. O'Neal Hamilton, Seventh District

Jocelyn Boyd Chief Clerk/Administrator Phone: (803) 896-5133 Fax: (803) 896-5246

Clerk's Office Phone: (803) 896-5100 Fax: (803) 896-5199

February 6, 2019

Erskine J. Carter d/b/a Carter Transit 75 McGree Street Bamberg, SC 29003

RE: Application for Class C (Taxi) Certificate Certificate of Public Convenience and Necessity for Operation of Motor Vehicle Carrier

Dear Mr. Carter:

I am returning your application for Class C (Taxi) Certificate for the following reason:

- Page 6 (Insurance Quote) The quote must be completed and signed by the insurance agent. If
  you get a quote online, print off the quote and attach to the form. Make sure that the premium
  and amounts of coverage are listed.
- 2. Page 8 Signature needs to be notarized.

If you have any questions relative to this docket, please call the Commission at (803) 896-5100.

Sincerely,

Ianice Schmieding

Clerk's Office

c - Carole Chauvin, Office of Regulatory Staff

RECEIVED

JUN 26 2019

PSC SC MAIL / DMS



## The Public Service Commission State of South Carolina

COMMISSIONERS
Comer H. "Randy" Randall, Third District
Chairman
Justin T. Williams, Sixth District
Vice Chairman
John E. "Butch" Howard, First District
Florence P. Belser, Second District
Thomas J. "Tom" Ervin, Fourth District
Swain E. Whitfield, Fifth District
G. O'Neal Hamilton, Seventh District

Jocelyn Boyd Chief Clerk/Executive Director Phone: (803) 896-5133 Fax: (803) 896-5246

Clerk's Office Phone: (803) 896-5100 Fax: (803) 896-5199

July 17, 2019

Erskine J. Carter d/b/a Carter Transit --75 McGree Street Bamberg SC 29003

RE: Application for Class C (Taxi) Certificate of Public Convenience and Necessity for Operation of Motor Vehicle Carrier

Dear Mr. Carter:

I am returning your application for Class C (Taxi) Certificate for the following reason:

Page 2 – Financial Statement/Assets – The Assets column does not calculate correctly.

Page 8 – Please indicate if you wish to receive matters from this commission through e-service (your e-mail address)

Once you have corrected the addition to the assets column and Page 8, please return your application for processing.

If you have any questions concerning this matter, please contact me at (803) 896-5240.

Sincerely,

Janice B. Schmieding Clerk's Office

cc Carole Chauvin, Office of Regulatory Staff (via e-mail)